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"NEC TENUI PENNA."

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B. O. COWLING, A. M., M. D., and L. P. YANDELL, M. D.
EDITORS.

WHAT HOPES FOR SPECIFICS?

The Pharmacist for December contains a very interesting editorial upon the question of Why are Plants Medicinal? "Most persons," it says, "believe that these properties were supplied to plants for the special use of man, and see in their distribution strong evidence of design." It does away with this idea, however, and goes on to show that "the welfare of the plant itself is the object of every part and constituent;" that the flower is bright and fragrant and honeyed to woo the insect which is to distribute its pollen, its ill-favored sisters having died long ago; that the soft and sweet-barked trees of the species which now are hard and bitter were at some time either eaten off the face of the earth by cormorants that had a fancy for such food; or, knowing that they would be eaten if they presented such attractive qualities, declined to put in an appearance. And so, going further down in the matter, we may be sure that the starch, sugar, gum, albumen, etc. were for the home consumption of the structure which developed them; and the oils, resins, alkaloids, acids, etc., etc. were not intended to fill the shelves of our pharmacies, but to form buttresses of defense.

Well, this is the evolutionary idea, you know, which it is far from our intention to discuss. It was the conclusion arrived at from these data—much more widely discussed by our contemporary—that arrested our attention. "In accordance with this

view," says the Pharmacist, "*it is highly improbable that any perfect remedies or specifics exist.* We should no more expect to find them than we should expect to find ready-made hats or houses in the forests. As we take advantage of nature in other respects, using her efforts in her own behalf for our purposes, so in this case the weapons plants have developed against their enemies we find have power against ours; and hence we use them when we can and for what they are worth. As we come to know more of the fundamental nature of disease and the chemico-physiological action of medicines we shall naturally learn how to more accurately favorably influence the human system by drugs; and in this way ultimately find that many proximate constituents of plants are entirely adequate to arrest certain morbid processes, and are therefore and to that extent specific in action; but we shall also find that many other proximate principles are essentially injurious and incapable of any useful application in the healing art."

It would be hard to state the case better than it is here stated. It is comforting to our hopes and flattering to our reason. It would break the heart of the world if it were definitely settled that there were no specifics for disease, either known or to be discovered. We learned physiological pundits and therapeutical skeptics who think we stamp the age, may smile at the credulity which seeks such things; but we are but a handful against the crowd of humanity which believes therein so ardently, that, if such hopes were taken away, would think the struggle of life vain, and would give up to die.

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And upon our word we do not see that this ardent life-long search for specific remedies is so terribly out of the way. So long as quinia shall break the paroxysm of a fever, and salicylic acid, in spite of Dr. Stillé, shall put an occasional joint at rest, or opium soothe, or iron strengthen, we have no right to despair, it seems to us, that other drugs may rise with rising years to accomplish conditions which we have not yet accomplished. We do not think our therapeutic hope is built on reeds.

Maybe we shall know some day the "fundamental nature of disease and the chemico-physiological action of medicines" so thoroughly that we shall be able to go straight from one to the other. Up to date, however, *a priori* discoveries of this sort have not crowded upon us. On the other hand, no doubt many millions of stomachs have been disquieted in vain with useless drugs; but some must have stuck to advantage, for whence came our pharmacopeia?

Therefore we say let the search for specific remedies proceed. And when we say specific remedies we mean both those which may cure directly and by means we know not of and those which shall do so indirectly and by ways whereof we think we know. To such ends we shall at least continue to wish good luck to every dose that curious humanity shall swallow—so long as our own bowels shall go unwrung.

KEEPING CHILDREN AFTER SCHOOL.—The New York Medical Record indorses the following from Good Company:

For some trifling breach of discipline numbers are obliged to remain in the bad air of the school-rooms, when already exhausted by the day's confinement. School-houses are thus turned into penitentiaries, and some of the children, perhaps, into invalids. It is well enough to use this means of discipline occasionally on the healthy and vicious; but thus to confine the very young or the delicate beyond the usual hours is a practice liable to cause serious injury. Teachers are to remember that an education gained at the expense of health is of no value; and the importance to the growing child of keeping in the best physical condition should be borne in mind in matters of dis-

cipline as well as of instruction. Then, again, the teacher suffers as much as the pupil. This consideration alone should make the practice unpopular.

All this is very true; but what is the teacher to do with the young animal when his ways are evil? If you box his ears you impair his hearing. If you punch his head you harm his brain. If you whip his hand you blunt his sense of touch. If you spank his bottom you injure him sexually. So it has been said and printed—all of these things—time and again. We suggest physic. An English teacher, who managed a successful female boarding-school, said she never had any flirtation troubles in her establishment. Watching her pupils closely, she detected the very first signs of an affair—a glance, a smile, the drop of a handkerchief, or the like—and immediately administered a large dose of salts. One draught, she declared, usually sufficed. The second never failed. It is probable that much of human iniquity has its origin in physical defect or derangement.

In the domestic circle we have found a dash or a douche of cold water of supreme benefit in acute attacks of juvenile temper, pouts, and stubbornness; and as prophylactics, calomel, quinine, bromide, etc. have often proved efficacious.

Original.

A CASE OF FRACTURE OF LEFT TEMPORAL BONE, RESULTING FATALLY, AND QUERIES THEREON.

BY L. S. OPPENHEIMER, M. D.

The publication of the following case is desired only because of the great importance of its medico-legal bearings, and the interest attaching to the answers to the queries appended.

On December —, 1879, I was summoned hastily to W—, Ky., to attend Mr. —, who, I was told, had been probably fatally injured. On arriving I obtained the following history from Drs. A. and B., the attending physicians:

The patient, aged twenty-one, a stout and

robust man, had received, three days prior to my visit, a blow upon the head with a cudgel, by which he was felled to the ground in an insensible condition, which lasted for about twelve hours. Immediately after the blow there was free emesis and slight arterial hemorrhage from left ear, which lasted till about two hours after consciousness had returned on the next day, when it ceased. Soon after this unconsciousness supervened and lasted throughout his illness.

Two days after the unconsciousness had returned I saw the patient. His condition at 3 P. M. was as follows: Unconsciousness, restlessness, both hands being frequently carried to the head as if to still his suffering; he could neither hear nor see, nor would he respond to questions; his pulse was exceedingly irregular, was full, and varied from 80 to 100 beats per minute; skin hot and dry; temperature 102° . Upon examination I discovered and called the attention of the attending physicians to a simple vertical fracture of the temporal bone, about two inches in length, immediately above and behind the concha of the left ear. No disturbance of muscular function, except slight convergent strabismus.

Treatment and Progress.—The attending physicians had prescribed morphia sulphate ($\frac{1}{16}$ of a grain) and potassium bromide (10 grains) every three hours. This, it was explained to me, was done to relieve pain. Only three doses had been given. In addition two doses of calomel, of fifteen grains each, were administered during the two days succeeding the injury, which purged patient violently, the purging only ceasing when the patient relapsed into coma. No topical applications had been made, as they did not seem to be well borne. On my arrival, however, we determined to try the ice-bladder, and cease giving internal medicines for a while. At 10 P. M. the temperature was 101° ; the pulse 130, regular but feeble. Pain and restlessness still continuing, we prescribed chloral hydrate in lieu of the morphia, with the effect of giving the patient a quiet sleep for a few hours. Next morning the pulse was still 130; temperature $102\frac{1}{2}^{\circ}$; patient restless, delirious. The temperature began rising during the day. Hands and feet of patient were cold. Pulse at noon 160; temperature 104° . In the evening coma set in, and the patient died during the night.

Autopsy.—In removing the calvarium care was taken to leave the temporal bone of the injured side intact. A simple vertical fracture through the temporal bone was found,

as previously diagnosed, the rent extending to the petrous portion of the bone. A slight laceration of the dura mater was found at a point corresponding to the seat of the fracture. The membrane was found thickened and infiltrated; and for the space of about two square inches, immediately beneath it, was a sulcus in the brain substance, apparently the result of softening from pressure by a clot. The membranes of the surrounding parts were normal in color and thickness. Thick, creamy pus was found between the pia and dura mater, covering the anterior convolutions of brain upon both sides, and the anterior portion of the base.

Queries.—1. Was this a case in which trephining was indicated; and if so, when?

2. Would such treatment have probably benefited the patient?

3. Was opium indicated in the case, and was the amount given harmful?

4. Was the aural hemorrhage beneficial or not, and was its cessation effective of good or harm, or neither?

5. Was the purulent meningitis a primary or secondary result of the injury?

LOUISVILLE.

Correspondence.

A NICE DIAGNOSIS.

To the Editors of the Louisville Medical News:

Having seen in the Herald an account of the birth of triplets, in which the doctor had made a pre-natal diagnosis of the sex, position, and number of the children, I feel tempted to report to the News a recent case of my own.

On the 16th of last month I was called to see Arethusa C., aged thirty-six, color black, who was then expecting her eighth accouchement. Her pains were feeble, but regular; and as she seemed unusually large, I sent for my implements of precision, as I was satisfied I had an unusual case. The callipers did not indicate any thing abnormal in the diameters of the pelvic passages, but on application of the micro-megaphone—an invention which intensifies the smallest sound to a wonderful degree—I was delighted to find that I had a case of unusual interest. By palpation and by rectal and vaginal touch I found the uterus not only enormously distended, but in a singularly irregular manner. One sharply-defined protuberance was particularly well marked.

After a careful manual examination I was

able to satisfy myself of the position of two children—one with the vertex to the left acetabulum, the other with the breech upon the opposite side; but the irregularity of the anterior protuberance puzzled me. I then applied the micro-megaphone, and counted distinctly four different sounds. Two were beating at the rate of a hundred and twenty, and one irregularly, sometimes a hundred and thirty-six and then a hundred and twenty-one; another, beating as high as a hundred and sixty-three. This latter seemed to occupy the irregularity above mentioned.

I then told the attendants to prepare for four; that two would be boys, one hermaphrodite, and one a monster shaped like a goat. I was led to this latter nicety of diagnosis by some experiments with my micro-megaphone with a pregnant goat, and was able to appreciate the resemblance in rhythm and frequency with the circulation of the fetus occupying the protuberance to those of the unborn kid. The patient when interrogated acknowledged being badly frightened by a large goat in the earlier days of her pregnancy.

To my intense gratification my diagnosis was verified. Two of the children were male, well developed, and weighed respectively six and a half and six and three fourths pounds. The hermaphrodite was a hypospadiac, but only breathed for a few minutes. The monster showed in all its features a marked resemblance to a young kid. The hard protuberance was due to the presence of the horns, which pressed against and distended that portion of the uterus. It only lived a short time, bleated once or twice, and then expired.

I send these hasty notes of the case, and will forward the hermaphrodite and the kid, which I have preserved in alcohol. Please let me know if you will accept them.

WILLIAM KIDD, M. D.

Dr. L. P. Yandell:

I venture to report for the News a few cases of disease which verify the correctness of your teaching: "Always treat disease with reference to its cause, regardless of its locality." This is one of the most important injunctions ever urged by a medical teacher. I daily am impressed by the truth of your teachings on this subject in connection with the treatment of skin-disease.

CASE I.—Eczema, in a lad aged sixteen, who applied to me for relief. His entire face and a portion of scalp were covered with a crust, and the paroxysms of itching

were almost intolerable. In this case I recognized malaria as the cause, and of course gave quinine with reference to the paroxysms of itching, and locally used olive oil. As soon as he was cinchonized the good effects of the treatment were realized, to the boy's great relief and to my satisfaction.

CASE II.—A young and robust man, aged twenty-four, whom I was told had facial erysipelas. On arrival I found his neck, head, and face so swollen that his eyes were completely closed; found an eruption on hands and arms; temperature $99\frac{1}{4}^{\circ}$ F. From the history of the case I soon ascertained that it was poisoning from the *rhus toxicodendron*. Remembering your success with quinia and iron in its treatment, I gave him quinine and iron, and topically used oxide-of-zinc ointment. His recovery was very rapid.

CASE III.—An old man, aged seventy-eight, came to me suffering from an eruption, which extended half around his body. He complained of a severe burning pain, and said he at first thought it was shingles; but as it did not yield to his treatment—blood of a black cat—it could not be. I recognized it as a case of herpes zoster. He was enfeebled by old age and hard work, and besides this his hygienic surroundings were very bad. My object in treatment was to increase his vitality; and by a tonic and anti-periodic course of treatment, and belladonna and opium locally, he to my surprise was rapidly and entirely restored to health.

CASE IV: *Urticaria*.—A boy, aged twelve, had urticaria on every third day in lieu of plain intermittent fever. After the urticaria showed itself there was vomiting and purging and considerable febrile disturbance, followed, in course of a few hours, by copious perspiration, and the wheals gradually disappearing, to show themselves no more until the third day. The vomiting and purging were not due to ingesta. Quinine rapidly cured this patient.

Quinine has never failed to cure urticaria for me, and I find persons who have "crops of boils" are speedily and effectually cured with quinine and iron. In fact there are but few diseases here that are not complicated by malaria.

A. O. OLIVER, M. D.

ROGERSVILLE, ALA.

FUCUS VESICULOSUS (ANTI-FAT.)—Fifty years ago this was commended as a cure for consumption, and was said to increase fat. Now it comes to the front as a remedy for polysarca.

Reviews.

Resources of the Southern Fields and Forests, Medical, Economical, and Agricultural. Being also a MEDICAL BOTANY OF THE SOUTHERN STATES, with Practical Information upon the useful Properties of the Trees, Plants, and Shrubs. By FRANCIS PEYRE PORCHER, M.D., formerly Surgeon in charge of City Hospitals, Charleston, and Lecturer upon Materia Medica and Therapeutics; Corresponding Member of the Medical and Surgical and Obstetric Societies, and the Lyceum of Natural History of New York, and of the Academy of Natural Sciences of Philadelphia. New edition, revised and largely augmented. Charleston: Walker, Evans, and Cogswell. 1869.

This valuable work, of seven hundred pages octavo, we welcome as an old friend of Confederate-army days. Many a time we have turned to it for counsel and aid when the medical purveyor replied to our requisition for drugs, "None on hand;" and many is the time we have had reason for gratitude to its worthy author for preparing the book. The present is a greatly amplified and improved edition. It is full of valuable information and suggestions. Every American physician—and especially the country doctor, who may obtain all the indigenous remedies fresh from the fields and forests—should own this book. Our native drugs have never been sufficiently investigated, and it is to be hoped that this attractive and important field may not remain much longer without earnest and practical workers. Its inexpensiveness places it within the reach of all. In paper binding it is only \$1.50; in muslin, \$2.50, including postage to any part of the United States.

A System of Medicine. Edited by J. RUSSELL REYNOLDS, M.D., F.R.S., Fellow of Royal College of Physicians, London; Fellow of Imperial Leopold-Carolina Academy of Germany; Fellow of University College, London; Professor of the Principles and Practice of Medicine in University College; Physician to University College Hospital; Examiner in Medicine to the University of London. With numerous additions and illustrations, by HENRY HARTSHORNE, A.M., M.D., Fellow of the College of Physicians of Philadelphia; formerly Professor of Practice of Medicine in the Medical Department of Pennsylvania College, and Physician to the Episcopal Hospital of Philadelphia; lately Professor of Hygiene in the University of Pennsylvania, and Professor of Hygiene and Diseases of Children in the Woman's Medical College of Pennsylvania; etc. In three volumes. Volume I: General Diseases and Diseases of Nervous System. Phila.: Henry C. Lea. 1879.

Really too much praise can scarcely be given to this noble book. It is a cyclope-

dia of medicine written by some of the best men of Europe. It is full of useful information such as one finds frequent need of in one's daily work; for no one head can possibly carry all the knowledge one needs in general practice, and one must refer sometimes to one's library. As a book of reference it is invaluable. It is up with the times. It is clear and concentrated in style, and its form is worthy of its famous publishers.

The Student's Guide to Diseases of the Eye. By EDWARD NETTLESHIP, F.R.C.S., Ophthalmic Surgeon to St. Thomas's Hospital. With eighty-nine illustrations. Phila.: Henry C. Lea. 1880.

Mr. Nettleship, of St. Thomas's Hospital, the author of this neat little work, has aimed, as he tells us, to supply in it the information students most need in their hospital-course, and we are sure he has produced a useful volume. Its eighty-nine illustrations add much to its attractiveness. Full directions for examining the eye are given. The descriptions of the various operations and suggestions for local and surgical treatment, and the etiology of eye-diseases, are done full justice to, but general treatment is not adequately considered.

Paracentesis of the Pericardium. A Consideration of the Surgical Treatment of Pericardial Effusions. By JOHN B. ROBERTS, A.M., M.D., Lecturer on Anatomy in the Philadelphia School of Anatomy, Demonstrator of Anatomy in the Philadelphia Dental College, Fellow of the Philadelphia Academy of Surgery. With illustrations. Philadelphia: J. B. Lippincott & Co. London: 16 Southampton Street, Covent Garden. 1880.

Dr. Roberts's monograph on Paracentesis of the Pericardium is an exhaustive essay on a most important subject, which has not heretofore been adequately-discussed in medical literature. It is the first book upon the subject yet published. The author's opportunities, scholarly acquirements, and devotion to the advancement of his profession eminently fit him for the work he has done so well.

Notes of Hospital Practice. Part I: Philadelphia Hospitals. Selected and arranged by SAMUEL M. MILLER, M.D. Philadelphia: Samuel M. Miller, M.D., publisher. 1879.

This is a small and inexpensive volume, containing much valuable information condensed from various medical-journal articles and from clinical lectures. It is suggestive rather than exhaustive—a sort of familiar conversation from various teachers.

A Treatise on Physiology and Hygiene: For Educational Institutions and General Readers. Fully illustrated. By JOS. C. HUTCHISON, M.D., President of the New York Pathological Society, Vice-president of New York Academy of Medicine, Surgeon to the Brooklyn City Hospital, late President of the Medical Society of the State of New York, etc. New York: Clark & Maynard, publishers, No. 5 Barclay Street.

This handbook of physiology and hygiene is designed especially for schools, colleges, and lay readers, and is written in clear, concise language, as devoid as may be of technical terms. A pronouncing glossary is an attractive and important feature of the work. No better book for the purposes for which it is written has yet been published.

A little learning is not only not "a dangerous thing," but is a very useful thing; and as all people can not possibly become thorough physiologists and profound hygienists, it is well that such books as Dr. Hutchison's are prepared.

A Manual of the Practice of Surgery. By W. FAIRLIS CLARKE, M.A. and M.B., Oxon., F.R.C.S., Ass't Surgeon to Charing-Cross Hospital. From the last London edition. Revised, with additions, by An American Surgeon. New York: William Wood & Co., 27 Great Jones St. 1879. (Wood's Library of Standard Authors.)

The medical profession of America is immensely indebted to William Wood & Co. for their judicious selection and inexpensive production of valuable books. Their library series of standard medical authors is sold for a sum so trifling that no physician has any excuse for not possessing them. The present volume, profusely illustrated, is one of the best of the series. We urge our readers to subscribe at once for these publications. They will constitute an excellent library of themselves.

Transactions of the Medical Association of the State of Missouri, at its Twenty-second Annual Session, held in Columbia, Mo., May 20 and 21, 1879. St. Louis: McCormick, Nixon & Co. 1879.

Gotten up in good typographical style, this volume of transactions contains evidence of the earnestness and ability of the medical profession in Missouri. The president's address is thoughtful, scholarly, and suggestive, and well repays perusal. The essays on medicine and surgery are exceptionally interesting, and many of them are embellished by excellent illustrations. But what will be the fate of these Transactions? Like those of the various state societies and those of the national association, they will

be seen by a few hundred physicians outside the organization, and will be read by some of their fortunate possessors, but will remain unknown to the mass of the profession; whereas, were they published in some current medical periodical—preferably a weekly—they would be widely circulated and read, and would enhance the reputation of the authors while they disseminated useful knowledge.

A Dictionary of the German Terms used in Medicine. By GEORGE R. CUTTER, M.D., Surgeon of the New York Eye and Ear Infirmary, Ophthalmic and Aural Surgeon to the St. Catherine's and Williamsburgh Hospitals, etc. New York: G. P. Putnam's Sons. 1879.

The uses of this dictionary are obvious. It would seem invaluable to the student of German medical literature. It evinces much learning and patience upon the part of the author. We commend it to English-speaking doctors, who have a weakness for the German, and to German doctors who may believe there is any thing in English medical language worth knowing.

Books and Pamphlets.

NEW REMEDIES. Report to the Wisconsin State Medical Society. By Henry P. Wenzel, M.D., of Lomira, Chairman of Committee. Reprint from the Transactions of the Wisconsin State Medical Society.

THE SANITATION OF SMALL CITIES: Soil, Drainage, Sewerage, and the Disposal of Sewage. By David Prince, M.D. Reprint from Transactions of the Illinois State Medical Society for 1879.

SPRAGUE'S GALVANOMETER, ARRANGED FOR THERAPEUTIC USES: A Report Read Before the Illinois State Medical Society, at Springfield, May 21, 1878. By David Prince, M.D., Jacksonville, Ill.

The Louisville Medical News.

Back numbers of the LOUISVILLE MEDICAL NEWS, with several exceptions, can be supplied. The price is six cents per copy, postpaid. Persons wishing to complete their files of the NEWS would do well to order missing numbers early, as but few copies remain of several of the issues.

A limited number of bound volumes of the NEWS is in stock. These can be obtained at the following prices: The NEWS for 1876, Vols. I and II bound together, \$3.50; 1877, Vols. III and IV bound together, and 1878, Vols. V and VI bound together, each \$4.50, or the three years for \$11.00, postpaid.

The bound volumes of the NEWS contain each six hundred and fifty pages filled with much matter of permanent value.

Address the publishers,

JOHN P. MORTON & COMPANY,
Louisville.

Miscellany.

OLEOMARGARINE.—From Louisville Evening Post and News:

It would be well for our legislators to consider a while before they pass a law making the manufacture of oleomargarine a penal offense. There will be a very unanimous opinion that when retail dealers sell it as butter they should be punished. Indeed the managers of the oleomargarine factory in this city are as anxious as are the Grangers to have this deception brought to an end. They contend very justly that oleomargarine is much superior to half the butter that is sold in this market, but they have no especial desire to get into this market. If we are so well satisfied that we would rather eat rancid butter than touch oleomargarine, then the proprietors are perfectly contented. They have orders from the East—from Europe—larger than they can fill.

This oleomargarine is manufactured by hastening the process of nature. Butter is really the fat of the animal that becomes milk, and then by a slow and primitive process is changed into butter. This butter is of various degrees of excellence, and it is safe to say that the fraud perpetrated in this country by palming off old, rancid, sour, funky butter as first-class creamery butter reaches into the millions. Oleomargarine changes the fat of the animal, by a rapid and artificial manipulation, into a substance that any chemist will tell you has all the properties of butter.

Now it is very absurd to attempt to put a stop to the production of this material. It is an evidence that there still lingers among us something of the same spirit that destroyed machinery for spinning and weaving when it was invented, and that wished to defeat Stephenson in his effort to build the first railroad. To attempt to suppress this industry would be the same in spirit as the attempt to suppress the manufacture of the Edison lamp, or to thwart the projectors of the Clement machine in the South. Every new invention disturbs to some extent existing industries, but the result is always to add to the sum of human happiness, to extend the conquests of mind over matter, and to better clothe and feed the human race.

This new invention instead of injuring the farmer will in fact add much to his wealth, if he is wise enough to avail himself of it. There are slaughtered here in Louisville ev-

ery week eight hundred head of cattle, to use small figures, and the fat substance is fully one hundred pounds a head. Before the establishment of the oleomargarine factory here this matter was sold at three and a half cents a pound; now it sells at seven cents. Or, in other words, calculating the increase at three cents on the eighty thousand pounds of fat, we see that there is an additional value given to the cattle slaughtered every week in Louisville of \$2,400. Certainly wise legislators will hesitate before they attempt to "suppress" such a valuable industry.

HOW TO CURE FITS OF SNEEZING.—Surgeon S. Messenger Bradley writes to British Medical Journal: During the recent rapid changes of temperature I caught a severe cold in my head, accompanied by almost incessant sneezing. My unfortunate nose gave me no rest. The slightest impact of cold air, or passing from the outside air into a warm room, equally brought on a fit of sneezing. In vain I snuffed camphor and pulsatilla; the light catarrh still triumphed over me. At length I resolved to see what the maintenance of an uniform temperature would do toward diminishing the irritability of my Schneiderian membrane, and accordingly I plugged my nostrils with cotton wool. The effect was instantaneous; I sneezed no more. Again and again I tested the efficacy of this simple remedy, always with the same result. However near I was to a sneeze, the introduction of the pledgets stopped it *sur le champ*. Nor was there any inconvenience from their presence, making them sufficiently firm not to tickle, and yet leaving them sufficiently loose to easily breathe through. This is really worth knowing, for incessant sneezing is among the greatest of smaller ills, and it seems only a rational conclusion to hope that in this simple plan we may have the most efficient remedy against one of the most distressing symptoms of hay fever.

WORK AND PLAY.—Canada Lancet: A recent writer has declared that there is no just discrimination between work and play except that of sentiment only. If life pursued its even tenor, there could be no question as to recreation after labor; the two would be identical. This, it is claimed, was true of that brilliant era of classic Greece, when man attained so nearly to the ideal both of mind and body. In the occupation of the joyous Grecian there was no such thing as work or play, but only life.

DOCTORS, ATTENTION!—We copy and endorse this editorial from the Pacific Med. and Surg. Journal: A good deal of attention has been attracted recently to a publication by a certain Dr. Salisbury, of Cleveland, O., claiming that he can cure consumption in any stage. His plan has nothing about it either physiological or rational, but is a sort of rough-and-tumble incursion into the kitchen and drug-shop. He has a list of permissible and prohibited articles of food, the distinction between the two being arbitrary and irrational. The only physiological idea we can perceive relates to the urine, which appears to be his sole test of the fitness of any aliment. For instance: "After the system gets in good running order, which is indicated by the urine flowing at the rate of three pints in the twenty-four hours, and standing constantly at 1.020 density," etc. A soft-boiled egg may be taken if it does not heighten the color of the urine. His tonic mixtures have nine or ten different ingredients, on the shot-gun principle. The "running of the machine" so that it will manufacture good urine and in proper quantity is his favorite idea. We have no right to presume that he is a charlatan, though he writes in the style of one. Take the following for illustration: "I have been treating this disease successfully for the past twenty years, and have had under my charge during that time over one thousand cases. I have only to say that the disease is so thoroughly worked up in all its details that I am able to produce it at will and as surely cure it." And again: "If the directions here given are faithfully followed out and persisted in, consumption in all its stages is a curable disease." The quack advertisements in the newspapers can scarcely go ahead of that.

M. CAZENEUVE reports to the Académie des Sciences concerning the influence of phosphorus on the urinary secretion. Experiments on the dog and the cat show that phosphorus given in toxic doses causes an increase of urea, phosphoric acid, sulphuric acid, the total nitrogen, and iron. The author disagrees with the view of certain physiologists who regard the liver as the principal organ formative of urea.—*Brit. Med. Jour.*

TEA-TASTING NOT INJURIOUS.—Dr. C. L. Dana, in the Medical Record, thus concludes an interesting and valuable paper: Whatever theory be taken to explain the matter, the fact that tea-tasting is a healthful pursuit seems to me to be indisputable.

MCDOWELL MONUMENT AT DANVILLE, KY. Philadelphia Med. Times: . . . We desire to express our great gratification that to one American physician or surgeon it has been given to have a public and permanent recognition of his services to humanity. Of a city that lets its Benjamin Franklin lie neglected, with grave unkempt, in an old and untrodden cemetery, it is too much to expect any remembrance of its great medical men of the past. But it is well that in the *Mississippi Valley, the future center of the nation*, there should be a granite shaft to bear witness that there is nobility in saving life, and that honor is no longer to be found solely amid the carnage of the battlefield.

WHAT AN OLD HORSE IS WORTH IN PARIS. The value of a horse in Paris which is no longer useful for harness purposes is estimated at 68 fr. (\$13.60), apportioned as follows: Skin, 13 fr. 60 c.; hair, 1 fr.; blood, 6 fr. 30 c.; nails, 12 c.; shoes, 1 fr. 80 c.; viscera, 1 fr. 60 c.; tendons, 30 c.; intestines, 1 fr.; grease, 4 fr. 98 c.; bones, 2 fr. 30 c.; flesh, 35 fr. The ultimate destination of the skin is the tan-pit; the tendons are used for glue, the feet for oil, the bones for animal black, the blood for Prussian blue, while the horse-flesh finds its place as a *pièce de résistance* in the cheap restaurants.—*Boston Journal of Chemistry.*

DR. BROWN-SÉQUARD has laid before the Académie des Sciences some recent experimental researches upon "a new property of the nervous system." Certain parts of the nervous system, he says, when under irritation, cause suddenly, or nearly so, a notable increase of the motor or sensitive properties of other parts of the system. Thus, transverse section of a lateral half of the base of the brain increases the motor properties of the parts of this center before the section, while the opposite is produced on the opposite side; the same with section of the sciatic nerve, or a lateral half of the dorsal or lumbar cord.—*British Med. Jour.*

VEGETARIANISM.—Med. Times and Gaz.: Recently twenty members of the Scottish Food Reform Society sat down to a repast consisting of six courses—namely, lentil and barley soup, haricot-bean pies, haricot-bean omelette with sauce, hominy pudding, pearl-meal pudding, tapioca and apples—which, exclusive of cooking, cost at the rate of 3½d. per head.

THE DEBATE ON ANTISEPTIC SURGERY.—The adjourned discussion upon Mr. McCormack's paper upon Antiseptic Surgery took place on the 17th December (Med. Times and Gazette). Sir James Paget concluded by remarking that there are groups of operations in which, so far as he could ascertain, the complete antiseptic treatment is absolutely essential to success; and by stating that of all the improvements achieved in surgery during his knowledge, the improvement in the mortality after operations is the greatest, and, without any comparison, he who had most contributed to it is Prof. Lister. Sir James's only doubt is whether Lister has done more good by antiseptic treatment than by provoking other surgeons to do their best in other ways.

GERMAN THERAPEUTICS.—New Orleans Med. and Surg. Journal: There is strong reason to believe that the modern treatment of disease in Germany has greatly deteriorated since the days of Niemeyer. Theorizing, histology, and diagnostic refinements have taken the place of the effort to cure disease by rational empiricism. Witness the next to worthless therapeutics in Ziemssen's Cyclopaedia. A Vienna correspondent in the Canada Med. and Surg. Journal gives some striking statistics. In Bamberger's clinic, of twenty-seven cases of pneumonia, seventeen died; twenty-four per cent of all cases of typhoid fever die; facial erysipelas is "frequently fatal," etc. We do not believe that the case-book of the average American physician shows any thing like this mortality, and our city hospitals certainly do not. It looks as if medical science in Germany was running to seed.

No fact is more evident than that the highest order of physicians and surgeons are not men remarkable for their knowledge of microscopy, of experimental physiology, and the other branches of theoretical medical science; and conversely, that the microscopists and pure physiologists are not remarkable as physicians, and indeed can not be. The attempt to pervert the proper purpose of medical schools, and to give a merely science aspect to medical teaching, is a fashion of the time which, if it gain more adherents, is likely to do serious mischief to the cause of medical education; for young men, allured by the glitter of scientific work, will neglect the important and really more difficult attainments of true professional studies.—*Dr. Bartholow.*

DIPSOMANIA.—Dr. Geo. M. Beard, in the British Medical Journal, says: Like every nervous disease of the family to which it belongs, it pretty steadily diminishes as we go south; yet there is more total abstinence in the North than in the South. There is no country in the world where there is so much total abstinence from drinking, and at the same time so much inebriety, as among the people of the northern and eastern parts of the United States.

VILLAGE GEOGRAPHY IN FRANCE.—The Ministry (*Revue Scientifique*) of the Interior is at present engaged in examining a proposal which we can not praise too much. It is proposed to place in every French commune a stone upon which the latitude and longitude of the place is inscribed, and the hydrographic basin of the locality.

Selections.

Experimental and Anatomical Investigations on Erysipelas.—The author (Dr. H. Tillmanus, of Leipzig) endeavored by these to unravel some yet disputed questions (Ed. Med. Jour.):

1. Is it possible to transfer erysipelas from diseased to healthy persons—that is, do fluids (lymph, blood, contents of vesifications, pus) taken from the erysipelatous area possess specific contagious peculiarities; as, for example, vaccine lymph?

Of twenty-five attempts to convey erysipelas by direct inoculation to healthy animals a positive result was obtained in five. Rabbits inoculated with one of the above-named fluids taken from men affected with erysipelas within the diseased area were affected by a disease in no way to be distinguished from erysipelas of human beings. Such cases only were assumed as satisfactory in which, besides typical, migratory, diffuse redness and swelling, general feverishness was also plainly recognizable. In one instance after inoculation with the contents of a bulla of erysipelas, which in other experiments induced a well-marked form, an abscess, accompanied by increased temperature and diarrhea, appeared at a distance from the point of inoculation, burst spontaneously and soon healed. This seemed to Tillmanus analogous to the cases where, after slight abrasions on the fingers, erysipelas shows itself first on the elbow or upper arm, or where an apparent primary erysipelas of the face arises when there has been a previous superficial lesion of continuity in a neighboring mucous cavity. As regards the term of incubation and the form of commencement in four of the five cases, redness and fever were simultaneously established twenty-four hours after inoculation; in the fifth the local symptoms came on first, forty-five hours after puncture, the fever twenty-four hours later. In all the successful cases the inoculated fluid contained bacteria. From this it appears that erysipelas is a transmittable and moderately contagious disease, and that the poison remains confined to the erysipelatous area.

2. What is the effect of carbolic acid on such fluids, from tissues affected with erysipelas, as by transference to sound individuals occasion it, and which then, with the greatest probability, contain its poison?

The addition of a two-to-four per cent carbolic-acid solution renders a previously active erysipelatous inoculating fluid quite inefficacious.

3. Occurrence and significance of bacteria in erysipelas.

The occurrence of bacteria in fluids from the tissues and in the tissues is no more a constant feature in erysipelas than in septicemia. It is thus possible that not every case of erysipelas is brought about by the migration of bacteria as such, and the advance of all cases of erysipelas is not connected with the presence of micro-organisms.—*Cond. from Schmidt's Jahrbücher.*

Gangrene of the Skin Following Vaccination.—At a late meeting of the Royal Medical and Chirurgical Society of London (British Medical Journal) Mr. Jonathan Hutchinson exhibited the body of a child, aged three months, which had been vaccinated November 11th. The child from whose arm the vaccine lymph was taken was apparently healthy; and three other children vaccinated with the same lymph showed no unusual symptoms. The other children of the same family were all healthy. On the eighth day the vaccinated spots had risen as usual, but the child's body presented an eruption, which the medical man under whose care it was believed to be variola. Three days later the vesicles of the eruption were surrounded by large red areolæ, which developed into gangrenous patches. The child was found dead one morning about three weeks after the vaccination. The gangrenous spots were not quite symmetrical, but were more copious and showed greater symmetry on the back than on the front of the body. The most advanced patches showed abrupt eschars; there was nothing like rupia. The head was less affected than the trunk. The vaccination scars showed the normal condition. An inquest had been held, it having been supposed that the condition was due to syphilis; but at present Mr. Hutchinson saw no reason for believing this to be the case. He suggested that it was a case of the eruption which sometimes follows vaccination, passing into gangrene. He had long believed that this sometimes occurred in varicella, but he had never before seen it in connection with vaccinia.

A Year of Constipation.—From the report of a case of Retention of Feces for Twelve Months, by Dr. James Dunlop, in the Medical Times and Gazette, we extract the following:

Mrs. G., fifty-four, the mother of four grown children, for more than twelve months had been in bad health—confined more or less to bed. Her great and constant complaint was the state of her bowels. She seldom had any passage without medicine, and when they did move her sufferings were so great that she dreaded going to stool; days, sometimes even weeks, were allowed to pass without an attempt at defecation. Continuous suffering. At night the pain and the sense of fullness and pressure in her rectum were very great, and to relieve her agony she had recourse to keeping the surface of the anus and perineum lubricated with oil. From time to time, and more especially after aperient medicine, there was a greenish, ill-smelling discharge from the bowels. It

was often tinged with blood, and as it came away there was some relief obtained. In May last I found her in great distress.

I introduced my oiled finger into the rectum and came in contact with a round, smooth tumor, the size of a small cricket-ball. It was movable, and I could turn it round and round in a large pouch in the rectum. I noticed that as I moved the mass about a quantity of thin, greenish feculent matter with a most offensive odor escaped. As she was suffering greatly, and very nervous, I had to content myself at this visit with the examination only. I was satisfied that the case was not one of malignant disease of the rectum, but a scybalum lying in a pouch of the rectum just above the anus, and that while it was retained it obstructed the solid portion of the feces, only permitting the fluids to pass from time to time along its sides. On the following day, with my fingers, aided by the handle of a spoon, I broke down the mass and removed it in pieces.

On the removal of the scybalum, which was dry, hard, and greenish in color, I washed out the rectal pouch with tepid water, and to my surprise there was ejected quite suddenly a large quantity of ill-conditioned feces which had long been pent up in the descending colon. Since then the lady has regained strength, and is now quite well.

Transit of a Pin from Stomach to Knee.—Dr. Evans writes (Brit. Med. Jour.): In reading Dr. Corbett's case, journey of a needle from the stomach to the hand, I am reminded of a similar case. I was asked to look at a servant's knee, and found a small abscess on the inner side above the knee. This I lanced and a black pin escaped. The girl declared it was a pin swallowed eight months previously.

A Modification of the Operation for Fistula in Ano.—Dr. J. J. Knott, of Atlanta, Ga., in Medical Record: The following procedure will do away with some of the inconveniences and the most of the pain attending the operation. Introduce the speculum, with the fenestra on a line with the fistulous track, pass the director through the fistula, allowing the speculum to remain *in situ*. With your curved, sharp-pointed bistoury, divide the tissues, and withdraw the speculum, director, and knife together. The advantages by this method: avoidance of pain to a great extent; a full view of all the parts; and, so far in my hands, the avoidance of tenesmus of the rectum, which is likely to bring on strangury and retention of urine. The two cases in which this method was adopted were cases which would call for an anesthetic by other methods.

The Treatment of Leprosy with Bauchee.—Mr. Lisbod, of Bombay, in Edinburgh Medical Journal: Bauchee is a native medicine obtained from *Psoralea corylifolia*, a plant belonging to the Leguminosæ. The part used is the seed. This medicine is well known to natives, and has been used by them from the earliest ages in scaly eruptions of the skin, and especially in leucoderma. The author only tried it in three cases, but his experience confirmed the generally-received opinion of the natives that it is a valuable medicine in the treatment of leprosy.

Two Cases of Carcinoma of the Breast, preceded by so-called eczema of the nipple and areolæ, are reported by Mr. Henry Morris in the British Medical Journal of December 13th.

The Prognosis of Cesarean Operations.—Dr. Wm. T. Lusk, in American Journal of Obstetrics:

The first pertinent fact that strikes us in examining the tabulated cases of cesarean section is that a very large proportion of the entire number have been derived from the reports of lying-in hospitals. Michaelis found that of ninety-six cases, the details of which were given with sufficient minuteness to leave no doubt concerning this point, thirty-six, or rather more than a third of the entire number, were hospital patients. With astonishment, too, he noticed that twenty-five of the thirty-six died, and that only eleven recovered; whereas of the sixty cases in private practice only twenty-nine died, while thirty-one recovered. This remarkable discrepancy in the result was such that Michaelis could not at first believe his eyes. When he found, however, that there was no possible source of error in his figures, he sought to account for the mortality in hospitals on the ground that the latter are the receptacles of all the most unpromising and hopeless class of cases, while the private practitioner more often has to deal with women in good health, and with slight degrees of deformity. Then he insinuates that the private physician does not usually care to stake his reputation upon an operation which probably will terminate fatally, but that, between weighing the case and summoning counsel and putting off action, the woman often dies undelivered before a decision is reached. Kayser's results were even worse than those of Michaelis, for in sixty-seven hospital cases he found the mortality seventy-nine per cent. Späth says there has not been a single case in the Lying-in Hospital in Vienna during the century in which the mother has survived.* Bauden, writing in 1873, says: "In Paris there has not been one successful case in eighty years, though in the present century the operation has been performed on as many as fifty women." This statement is often quoted as a crushing rejoinder to those who claim that the time has not yet come for sweeping the cesarean section from the list of legitimate obstetrical operations. But as we glance over the list of operators, and find fourteen deaths accredited to Sentin, seventeen deaths to Paul Dubois, four deaths to De Poul, three deaths to Danyau, two deaths to Tarnier, and several to Moreau, we find in the ghastly record only fresh evidence that there is little hope for the success of abdominal surgery, whatever the skill of the operator, when performed in the putrid atmosphere of an infected hospital.

On the other hand the results of the cesarean section in healthy rural localities are in striking contrast with those obtained in hospitals, or even in large, overcrowded cities. Thus Stoltz mentions that in the Department of Creuse the operation was performed six times between the years 1843 and 1852, and in every case with success. Hoebecke operated sixteen times in the country, and though his patients were poor and so scattered that he was not able to visit them as frequently as was desirable, eleven of them recovered. Maslieurat-Lagernard operated six times in the country; all of his patients recovered. Prevost had three successes in four operations. Cottmann and Pilate each had two successful cases. In Ohio, Harris reports six recoveries in eight operations; in Louisiana, fourteen recoveries in eighteen operations.

*Excepting one case by himself and three by Carl Braun, making four successful operations out of seven that were operated upon in Vienna since 1877. Dr. R. P. Harris collates fourteen cases for the year 1876, with seven recoveries.

Case of Fatal Fungus Poisoning by Agaricus (Amanita) Phalloides.—Chas. B. Plowright, M. R. C. S., in the Lancet:

A boy aged twelve, at 11:30 A. M. on September 27th ate a portion of the pileus of an uncooked specimen of *Agaricus phalloides*, which he had gathered beside a wood in mistake for the common mushroom (*Agaricus campestris*). He walked home, three miles, and spent the evening with friends. At 1 A. M. on the morning of the 28th he awoke complaining of great thirst, which was speedily followed by vomiting and purging, for the relief of which some citrate of magnesia was given him. These symptoms continued until about 8 A. M., when, feeling better, he took some biscuit soaked in milk. About noon he vomited again, for which a dose of citrate of magnesia was administered. The vomiting and purging continued until 6 P. M. An ounce of castor oil was given him in two doses. September 29th: Feeling better; got up for two hours. September 30th: He awoke complaining of severe abdominal pain; in a high fever; excessive thirst, and acute pain over abdominal region. There was great palpitation of the heart, vomiting, purging, and remarkable exhaustion. Morphia, spirit of chloroform, and compound tincture of cardamoms were ordered every three hours, with small doses of whisky at frequent intervals. 7 P. M.: All the symptoms ameliorated except the exhaustion. September 31st: Patient had a comfortable night, but became worse about 7 A. M.; was slightly convulsed, and died in half an hour.

Remarks. *Agaricus phalloides* is not uncommon in woods during autumn. The fact that the fungus was eaten raw—a somewhat unusual circumstance—is worthy of note, as it is well known to mycologists that many species which are unwholesome when fresh are constantly eaten with impunity when cooked. This species, moreover, when raw has no acid or unpleasant flavor in the mouth. It possesses a rather agreeable taste, not unlike the common mushroom, though more insipid. Yet it acted as an irritant poison, of sufficient virulence to produce peritonitis and death on the fourth day. The quantity taken, as far as I can make out, was about half an ounce in weight. Although this was eaten when the stomach was empty, no symptoms were produced before the lapse of twelve hours and a half.

The medico-legal aspect of the case is highly important from the potency of the poison, combined with an entire absence of taste; and the great difficulty, not to say improbability of recognizing its presence by any chemical process at present at our command.

Apomorphia in Asthma.—North Carolina Medical Journal: One tenth of a grain of apomorphia introduced hypodermically will relieve the orthopnea of asthma in a surprisingly short time. Our readers should add this to their list of "remedies."

Salicylic Acid in Lupus.—New York Medical Journal: In a case of ulcerous lupus of the face, which had lasted five years, and after every remedy had been tried in vain, Dr. Ameglio painted the parts three times a day with salicylic acid six parts, to glycerin twenty parts. In a few days the readily-bleeding vegetations were withered, the ulcerating surface dried and assumed a good character, and complete cicatrization had occurred in one month. The patient at the same time used the arsenic treatment.—*Gaz. degli Ospedali; Memorabilien.*

Atresia Vaginae.—John Husband, F. R. C. S. E., Ajmere, South India, in *British Med. Jour.*: A young woman, aged twenty-two, was admitted into the Female Mission Hospital, Ajmere, anxious for relief of occluded vagina. She began to menstruate when she was twelve years of age; the menstrual flow appeared at regular monthly intervals; she passed her monthly periods with the minimum amount of suffering; the fluid normal in quantity. Her parents had married her to her husband without indicating the condition of affairs, the consequence of which was he treated her with contempt, refused to give her jewels to wear, or even decent clothes, and she was known as a "hermaphrodite" and was despised of all her neighbors. On examination I found not the slightest trace of a vagina. At the upper part of what should have been the vaginal orifice there was a small pouch-like projection, which turned out to be the urethra greatly dilated. With the finger in the rectum, there was no difficulty in making out the existence of the uterus, the mouth of which, opening into the urethral canal, accounted for the ease with which the menstrual function had been performed. Next day I proceeded to operate. The patient having been anesthetised and a staff introduced through the urethra into the bladder made a channel through the tissues between the urethra and rectum up to the uterus. A plug of lint, smeared with carbolic oil, was inserted in the wound, and the patient kept in the recumbent position for a number of days. To keep the canal patent, glass plugs were not available; but one made of lac was found the best substitute. The woman herself, being extremely anxious that the operation should be successful, did her best to carry out instructions. A few months after dismissal the woman returned in great glee to tell me she was pregnant. At intervals during her pregnancy she came to have the canal examined. Fortunately the child was a small one. The labor passed off with the minimum of suffering, and without the rupture, apparently, of a single fiber. I saw mother and child two and a half months after confinement, both vigorous. The woman is not only a happy mother, but has been restored to her friends and to all the enjoyments of the married state.

Constipation in Children.—Dr. J. L. Smith, in a paper on this subject, writes, in the *Med. Record*:

The character of the food, apart from the amount of liquid which it contains, obviously has a marked influence upon the consistence and frequency of the stools. Occasionally the intestines act sluggishly from insufficiency of food. Thus the infant sometimes hangs an unusually long time on the breast, and the mother or wet-nurse believes it to be a hearty nurser, when there is really deficiency of milk, and the stools are scanty and infrequent from lack of material. Again, constipation is not uncommon in infants who nurse heartily, and seem to obtain a sufficient quantity of milk, and the cause of it is not the state of the digestive organs, but in the milk. We find that now and then breast-milk has a constipating effect, although we discover nothing to cause this result in the mother's diet or health. The comparison of ordinary milk with colostrum may furnish a clue to the explanation. Colostrum is known to be more laxative than ordinary milk, and it differs from it chemically in containing more butter, sugar, and salts. Hence the theory seems plausible that, when breast-milk is constipating, these elements occur in less than the normal quantity. And treatment sug-

gested by this theory obviates the constipation. The use of a diet which consists chiefly of assimilable substances, as animal food, and from which, after the digestive process, little coarse and stimulating residuum remains, is obviously apt to produce a sluggish state of the bowels. On the other hand, coarse food, as fruits with their seeds, coarsely-ground meal, etc., which stimulate the peristaltic action and the secretions, increase the number and frequency of the alvine discharges.

Slow Pulses.—Mr. Edward Garraway writes in *British Medical Journal*: Mr. Noble, in reporting an interesting case of slow pulse (36) in an old gentleman of ninety-six, asks if such is rare. An old woman here recently passed quietly away at eighty-three, whose normal pulse, when she was in perfect health some months before her decease, was 25. I am attending a young lady whose lungs I believe to be studded with tubercles throughout. She is emaciated; has cough, night-sweats, and a temperature of 101. She is, and has long been, engaged in teaching at her own house; continually asserts herself as well, and deprecates my "making a fuss" about her. The pulse is 180 on entering the room, but, after a quarter of an hour of quiet converse, settles down to 168, and so permanently remains. Her condition has not varied for many months. And Mr. R. Park adds: A parish minister in Ayrshire, whose pulse, very carefully counted by me during the summer of 1875, in the afternoon, numbered 32; and on various other occasions was only 36. His pulse has always been slow. The sounds were clear, deliberate, and prolonged. When the pulse was counted at 32 there was a condition of general nervous prostration. At other times he had ordinary health. The patient is ordinarily vivacious, and not by any means of a morose habit.

Topical Blood-letting as a Remedy for Skin Diseases.—Dr. J. V. Shoemaker, of Philadelphia, in a paper read before the Pennsylvania State Medical Society (*Pacific Med. and Surg. Journal*), recommends scarifications and punctures as the most efficacious treatment in many forms of skin-disease. They act by giving vent to the engorged blood and the effused serum of the tissues, and awakening action of absorbent vessels. He prefers a small needle-knife, and by puncturing the surface with it has succeeded in the treatment of inflammation of the hair follicles of the beard, acne, enlargement of the blood-vessels of the face, chronic eczema, excess of pigment of the skin, and neuroses. He adds: Puncturing is equally efficacious in arousing the torpid tissues to activity in excess of pigment of the skin and in allaying the pruritic troubles of old age. I have relieved and, with appropriate internal treatment, have cured some of the worst cases of pruritic difficulty in old persons by the above method of puncturing over all the diseased surface. This application blunts the irritation of the cutaneous nerves, and relieves the capillary congestion set up by the morbid condition of the part. After puncturing the surface, it should be allowed to bleed freely by the application of warm or hot water, either one or the other of which I use in all cases of local abstraction of blood. The relief afforded by this method of treating many cutaneous affections will be best manifested by patients wishing a repetition of the operation, as has been my experience again and again in both dispensary and private practice.